PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

26448-520

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS]		 T	OR 7		
			5/					RATE	FEE	┨	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			5 / minus 20=		* 3/			X\$ 9=	279	OR	X\$18=	
-	DEPENDENT C		5 minus 3 =		2			X43=	86	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL	750	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2)						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	X\$ 9=	·	OR	X\$18=	
	Independent	*	Minus	***	01.434	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		•			•							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		= .	 	X43=		l	X86=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	7002	
								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		•										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	_	OR	X86=	
	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								~ }		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE	
. 1	The "Highest Num	mber Previously Paid ber Previously Paid	To For IN I HIS I For" (Total or	SPACE IS Independei	ness than	i 3, enter 3.º highest number	r foun	d in the app	opriate box	in colu	ımn 1.	